

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

Application No.: **To be Assigned**
 Filing Date: **Concurrently herewith**
 Attorney Docket No.: **US20010201**
 Inventor Name(s):
 Title: **NON-AQUEOUS WASHING MACHINE &
METHODS**

Express Mail Label No. **EV 118532775 US**

17858 U.S. PTO
10/699159



APPLICATION ELEMENTS	ADDRESS TO: Assistant commissioner for Patents Box Patent Application Washington, DC 20231
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- ☒ Fee Transmittal Form
☐ Patent Application data Entry Form
☒ Specification comprising (74) pages, (78) claims.
☒ Drawings (Sixteen) (16) sheets
☐ Declaration and Power of Attorney

ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet and document(s))
☐ Information Disclosure Statement (IDS)/PTO-1449
☐ Copies of IDS citations
☐ Preliminary Amendment
☒ Return Receipt Postcard
☐ Other:

IF A CONTINUING APPLICATION

☐ Non-Provisional of Provisional ☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of
 prior application No: Filed:

CORRESPONDENCE ADDRESS

Name	WHIRLPOOL PATENTS COMPANY – MD 0750				
Address	500 Renaissance Drive Suite 102				
City	St. Joseph	State	Michigan	Zip Code	49085
County	Berrien	Telephone	269-923-5470	Fax	269-923-5778

Name	Stephen Krefman	Registration No.	Date
Signature		28,631	10/31/03

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as Express Mail in an envelope addressed to the: Commissioner for Patents, Alexandria, VA 22313-1450.

Date: 10/31/03

10/31/03



FEE TRANSMITTAL FORM

Total Amount of Payment **\$2,158.00**

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CLAIMS AS FILED - PART I			OTHER THAN SMALL ENTITY		
	Number Filed		Number Extra	Rate	Fee
Basic Fee	1		0	\$770.00	\$770.00
Total Claims	78	-20	58	x \$18 =	\$1,044.00
Independent Claims	7	-3	4	x \$86=	\$344.00
TOTAL FEE =					\$2,158.00

CLAIMS AS AMENDED - PART II						
AMENDMENT A	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total		Minus	20		\$18	
Independent Claims		Minus			\$86	
TOTAL FEE =						\$

AMENDMENT B	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total		Minus	20	0	\$18	0
Independent Claims		Minus	3	0	\$86	0
TOTAL FEE =						0

SUBMITTED BY:			
Name	STEPHEN KREFMAN		Registration No. 28,631
Signature			Date: 10/31/03

Charge Deposit Account No. **23-1660** in the amount of **\$2,158.00**

The commissioner is hereby authorized to charge any additional fees which may be required or to credit any overpayment to account **23-1660**.